FROM iTHRIV (integrated Translational Health Research Institute of Virginia)
Additional Information on Community Engaged Research and Social Determinants of Health

[Adapted from MICHR (Michigan Institution for Clinical and Health Research) (1)]

Applicants interested in applying for this funding are encouraged to refer to this section for definitions of key terms and background information about community engagement in research.

What is Community Engagement in Research?

Community engagement in research is a process that supports authentic partnership of people affiliated with or self-identified by geographic proximity, special interest, and/or similar situations to address issues affecting the well-being of the community of focus (2). Community-engaged research approaches are built on the premise that the health issues being studied are best understood by the community members living in the environments where the research is taking place, and that communities should be directly involved in the decisions that will affect their lives. This process requires power sharing, equity, and flexibility in conducting research in a manner that fits the priorities, needs, and capacities of the communities involved (2).

There are different models of community-engaged research that have varying levels of community involvement. Community-Based Participatory Research (CBPR) is a specific type of community-engaged research that equitably involves community members, organizational representatives, and academic researchers in all aspects of the research process (3, 4). Applicants are encouraged to utilize a CBPR approach for this funding mechanism, or a similar participatory approach that strives for equitable involvement of all partners throughout the research process (5).

Definition of Community

For this funding opportunity, "community" is defined more broadly as a group of people affiliated by similar characteristics, such as identities (e.g. social/economic backgrounds), geographic location (e.g. city of Flint), special interests (e.g. coalition to reduce childhood obesity), and/or situations that affects the well-being of that group. Applicants must clearly describe the specific community or communities that represent the focus of the partnership.

** The PHI would like to distinguish between Patient Populations (seen within the walls of a hospital or clinic setting) and Communities. Proposals that strictly aim to study/work with patient populations will not be considered responsive. Patient populations within a community (patients in Town X, patients from zip code Y, patients in a subcommunity afflicted by health disparities) is considered responsive. To discuss the community and/or populations of interest, please reach out directly to Karen Ingersoll (kes7a@uvahealth.org) to discuss.

Nonresponsive Example: creating a UVA Health Patient Advisory Board as the only community engagement activity associated with the proposal

What are social determinants of health?

Healthy People 2020 provides a definition of social determinants of health: "Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks (6)."

Examples of *social and physical determinants* include:

- "Availability of resources to meet daily needs (e.g., safe housing and local food markets)
- Access to educational, economic, and job opportunities
- Access to health care services
- Quality of education and job training
- Availability of community-based resources in support of community living and opportunities for recreational and leisure-time activities
- Transportation options
- Public safety
- Social support
- Social norms and attitudes (e.g., discrimination, racism, and distrust of government)
- Exposure to crime, violence, and social disorder (e.g., presence of trash and lack of cooperation in a community)
- Socioeconomic conditions (e.g., concentrated poverty and stressful conditions that accompany)
- Residential segregation
- Language/Literacy
- Access to mass media and emerging technologies (e.g., cell phones and social media)
- Culture
- Natural environment, green space (e.g., trees and grass) or weather (e.g., climate change)
- Built environment, such as buildings, sidewalks, bike lanes, and roads
- Worksites, schools, and recreational settings
- Housing and community design
- Exposure to toxic substances and other physical hazards
- Physical barriers, especially for people with disabilities
- Aesthetic elements (e.g., good lighting, trees, and benches)" (6)

References

1. MICHR (Michigan Institution for Clinical and Health Research) https://michr.umich.edu/
2. Ahmed S, Palermo A. Community engagement in research: Frameworks for education and peer review.
3. *American Journal of Public Health*. 2010; 100(8):1380–1387.
4. Israel B, Rowe Z. Strategies for building and sustaining equitable, effective community-based participatory research partnerships. *Presented at the MICHR Community Engagement Symposium.* 2013.
5. *Methods in community-based participatory research for health*. 2005; 52-72.
6. Healthy People 2020 (2019). Accessed March 2019. Available: https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health